



## **Supplemental Application Data Sheet**

### **Application Information**

|                                  |   |
|----------------------------------|---|
| <u>Application No.::</u>         | <u>10/777,455</u>   |
| <u>Filing Date::</u>             | <u>February 11, 2004</u>                                    |
| Application Type::               | Regular   |
| Subject Matter::                 | Utility   |
| Suggested Group Art Unit::       | <del>Not Yet Assigned</del> <u>1623</u>                     |
| CD-ROM or CD-R?::                | None  |
| Sequence submission?::           | None  |
| Computer Readable Form (CRF)?::  | No  |
| Title::                          | LINCOMYCIN DERIVATIVES<br>POSSESSING ANTIBACTERIAL ACTIVITY |
| Attorney Docket Number::         | 342312004920  |
| Request for Early Publication?:: | No  |
| Request for Non-Publication?::   | No  |
| Total Drawing Sheets::           | None  |
| Small Entity?::                  | No  |
| Petition included?::             | No  |
| Secrecy Order in Parent Appl.?:: | No  |

### **Applicant Information**

|                                  |                   |
|----------------------------------|-------------------|
| Applicant Authority Type::       | Inventor          |
| Primary Citizenship Country::    | US                |
| Status::                         | Full Capacity     |
| Given Name::                     | Jason             |
| Middle Name::                    | G.                |
| Family Name::                    | LEWIS             |
| City of Residence::              | Hayward           |
| State or Province of Residence:: | CA                |
| Country of Residence::           | US                |
| Street of mailing address::      | 2939 Kelly Street |

City of mailing address:: Hayward  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94541

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Dinesh  
Middle Name:: V.  
Family Name:: PATEL  
City of Residence:: Fremont  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 45109 Cougar Circle  
City of mailing address:: Fremont  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94539

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Anandan  
Middle Name:: S.  
Family Name:: KUMAR  
City of Residence:: Fremont  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of mailing address:: 45109 Cougar Circle  
City of mailing address:: Fremont  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94539

Applicant Authority Type:: Inventor  
 Primary Citizenship Country:: US  
 Status:: Full Capacity  
 Given Name:: Mikhail  
 Middle Name:: F.  
 Family Name:: GORDEEV  
 City of Residence:: ~~South San Francisco~~ Castro Valley  
 State or Province of Residence:: CA  
 Country of Residence:: US  
 Street of mailing address:: ~~270 East Grand Avenue~~ 5072 Stone  
 Canyon Drive  
 City of mailing address:: ~~South San Francisco~~ Castro Valley  
 State or Province of mailing address:: CA  
 Postal or Zip Code of mailing address:: ~~94080~~ 94552

#### Correspondence Information

Correspondence Customer Number:: 25226

#### Representative Information

Representative Customer Number:: 25226

#### Domestic Priority Information

| Application::           | Continuity Type::  | Parent Application:: | Parent Filing Date:: |
|-------------------------|--|----------------------|----------------------|
| This Application        | Continuation-in-part of  | 10/642,807           | 08/15/03             |
| 10/642,807              | An application claiming the benefit under 35 USC 119(e)        | 60/403,770           | 08/15/02             |
| <u>This Application</u> | <u>An application claiming the benefit under 35 USC 119(e)</u> | <u>60/479,502</u>    | <u>06/17/03</u>      |

**Assignee Information**

Assignee name:: VICURON PHARMACEUTICALS INC.  
Street of mailing address:: 34790 Ardentech Ct.  
City of mailing address:: Fremont  
State or Province of mailing address:: CA  
Postal or Zip Code of mailing address:: 94555